## Ratio of girls to boys in India continues to decline

Sanjay Kumar New Delhi

The continuous decline in numbers of girls in the age group 0-6 years compared with boys in several states has shocked demographers in India and has made policy makers sit up and take notice. A new report, *Missing*, released by the United Nations Population Fund on 20 October, maps the adverse sex ratio among children.

India's population stood at 1.03 billion on 1 March 2001, having risen 21% between 1991 and 2001. "What did not rise, but rather declined shockingly, was the sex ratio," says the report.

The sex ratio, calculated as number of girls per 1000 boys in the 0-6 age group, declined from 945 girls per 1000 boys in the 1991 census to 927 during the 2001 census.

These latest falls come on top of a steady decline during the 1960s, '70s and '80s. The ratio fell from 976 in 1961 to 964 in 1971 and to 962 in 1981.

"A stage may soon come where it would become extremely difficult, if not impossible, to make up for the missing girls," says François Farah, country representative of the UN Population Fund. "Today we are at a stage where many villages are

having fewer or no small daughters and... the resulting imbalance can destroy the social and human fabric," he added.

In 2001, four states—Punjab, Haryana, Himachal, and Gujarat—fell into the category of having fewer than 800 girls per 1000 boys for the first time. In Punjab the decline was in 10 of the 17 districts, whereas in Haryana state almost all districts recorded fewer than 850 girls. In Fatehgarh, in Punjab, the number of girls declined to 754 per 1000 boys.

Explanations for this phenomenon include the traditional Indian penchant for a male son—who supports the parents in old age and performs their last rites during cremation—whereas females are considered a burden and a liability on whom the parents have to spend huge amounts as "dowry" for getting married.

Mira Shiva, director of women's health at the Voluntary Health Association of India, a leading health non-governmental organisation, blames the epidemic of killing female fetuses in the womb on the widespread availability and affordability of ultrasound machines, which are used for sex determination of the fetus. Mothers then proceed to have a termination if the fetus is found to be female.

Despite legislation, sex determination tests have continued and have spread rapidly even to remote areas. The number of ultrasound machines in India is now estimated to be nearly 100 000, say Mira Shiva and demographer Ashish Bose in a detailed study of abortion of female fetuses published in August.

"Involvement of the medical community in this criminal activity indulged in by parents of the unborn child and the doctors is 100%," says Dr Puneet Bedi, independent health activist and gynaecologist. The "missing girls" essentially means that millions of medical consultations and abortions have taken place with the active connivance of the medical community, who make a quick buck out of them, says Dr Bedi.

Missing can be accessed on the United Nations Population Fund's website at http://www.unfpa.org.in/



This girl from Delhi will be part of a minority group when she grows up. The number of girls aged 0-6 per 1000 boys in that age group has declined from 976 in 1961 to 927 in 2001

## Health secretary demands patients have equal access to cancer drugs

Owen Dyer London

In its first major review of cancer policy since the NHS cancer plan was announced in 2000 the government says that it is already halfway to meeting the central target set for 2010 but that more must be done to even out social and geographical disparities in treatment and outcomes.

The three year progress report, *Maintaining the Momentum*, pronounces the government well satisfied with its progress to date and lists hundreds of initiatives, programmes, and organisations started over the past three years.

Introducing the document in the company of national can-

cer director Mike Richards, health secretary John Reid drew attention to the fall in death rates. The central promise of the cancer plan was, by 2010, to reduce the number of deaths from cancer in people aged under 75 by 20% from a 1995-7 baseline. Mortality in this age group is now 10.3% below the baseline. This is a continuation of a rapid downward trend that began in the early 1990s.

The report notes that Britain has improved its survival rates relative to the rest of Europe overall, but it avoids direct comparisons with similar countries such as France and Ger-

many, which continue to do significantly better.

One of the gravest problems identified by the 2000 cancer plan was the fact that manual workers are almost twice as likely to die of cancer as are professionals, a trend that is attributed to differences in lifestyle rather than treatment. Pilot projects to reduce smoking have been concentrated in the poorest areas, and from next year the government plans to provide a piece of fruit a day in schools across the country.

In a recent report the charity CancerBACUP found significant variation around the country in the availability of the latest drugs to treat cancer. Although 61% of women in the south west had access to the new breast cancer drug trastuzumab (Herceptin), only 14% had access in the Midlands. Calling this situation unacceptable, Dr Reid said he

has instructed the cancer "tsar," Mike Richards, to investigate and iron out the differences.

Promises to reduce waiting times have largely been kept, with 98% of patients with suspected cancer being seen by a specialist within two weeks of an urgent referral by their GP, compared with 63% in 1997. The number of cancer consultants has increased by 22% since 1999.

Although the report is mostly about changes already implemented, it holds out the promise of new screening programmes for prostate cancer and bowel cancer. Studies are under way to compare sigmoidoscopy with faecal occult blood examination in the early detection of bowel cancer.

Maintaining the Momentum is accessible at www.doh.gov.uk/cancer/progressreport2003/report.pdf